

Correspondence

Sexual transmission of intestinal parasites

TO THE EDITOR *British Journal of Venereal Diseases*

SIR—I should like to comment on the letter from Harris and Morton (1973) on the possible sexual transmission of intestinal parasites.

Abrahm (1972) did not mention that any steps were taken to exclude co-existent sexually-transmitted infection, the author ascribing the many various intestinal parasites in his patient to the use of marihuana sprinkled on salads.

Harkness (1950) devoted a whole chapter to urethritis caused by (*inter alia*) intestinal protozoa, metazoa, and fungi, giving over 160 previous references.

I have described five cases of threadworm infestation in homosexuals, in which the possibility of contamination *via* the fingers, lips, and genitalia in sexual play was considered (Waugh, 1972). Unfortunately, in those five cases, the partners were not examined, but I have since seen six homosexual pairs in each of which one had threadworm (*Enterobius vermicularis*) infestation. In all cases the parasite was verified by microscopy.

Case reports

PAIR 1 A 25-year-old English television producer had non-specific urethritis; he also mentioned that he had recently been scratching his anus, especially at night, and he was found to have threadworms.

His 33-year-old white South African dancer friend of 6 months' duration was found to have proctitis but no sign of threadworms. They only admitted to penile-anal penetration and mutual fellatio.

The first patient's infestation was cleared with piperazine. 6 months later he was again seen with a fresh attack of rectal gonorrhoea, but there were no threadworms although he was still living with the same friend.

PAIR 2 A 29-year-old English art lecturer complained of pruritus ani. He was found to have no sexually-transmitted infection at the time but to be infested with threadworms, which responded to piperazine.

His flat-mate, a **37-year-old Welsh actor**, was examined, and although he had had gonorrhoea no less than five times before, he was found to be clear of not only

venereal disease but also of threadworms. He was not given any anthelmintics and has since been seen with proctitis but no threadworms.

Incidentally, although this pair had been together for 9 months and admitted unhibited sexual play, the 37-year-old actor had been living one year previously with the 25-year-old television producer of Pair 1.

PAIR 3 This pair had lived together for 18 months but admitted being promiscuous. A 31-year-old English meteorologist, on a routine follow-up visit after the treatment of secondary syphilis 6 months before, showed a threadworm on a paper tissue which he had picked off himself. Subsequent examination revealed *Enterobius vermicularis* which cleared after treatment with piperazine.

His 24-year-old English school-teacher friend was seen at the same time, having been treated for early latent syphilis 6 months before. He was not found to be infested, but was afterwards given viprynum as prophylactic treatment by his general practitioner.

PAIR 4 A 24-year-old English librarian, who was always passive and also enjoyed actively performing anilingus, complained of anal itching and was found to be harbouring threadworms, which responded to piperazine.

His friend of 4 weeks' duration, a **22-year-old Irish student**, who was always active, was free of threadworms but had a penile wart.

PAIR 5 This pair was perhaps the most bizarre of those in this report. It consisted of a 28-year-old white South African houseman-valet and his 20-year-old East End decorator friend of 6 weeks' duration. They both had a fetish for wearing leather clothes.

The older man had been seen previously twice for urethral and twice for rectal gonorrhoea; he had been complaining of intense anal irritation, especially at night, for 3 months before both adults and ova of *E. vermicularis* were found. The pruritis and threadworms disappeared after treatment with piperazine. The patient had attributed his threadworms to gorging the Stilton cheese of his employer, a wealthy banker living in Kensington. The patient admitted being the passive agent in a deviation which is spreading to this country from North America, namely being the recipient whilst the younger

of the two passed his fist into the anus; this was done while both sniffed capsules of amyl nitrite ("poppers"). No sign of threadworms was found in the younger man.

PAIR 6 The last couple consisted of a **24-year-old railway clerk** who had lived with his active friend, a **37-year-old business man**, for 3 years. The latter frequently made trips to the United States of America, and in his absence the younger man would meet other partners.

After one such encounter, he presented with rectal gonorrhoea, when adult threadworms were also found. Meanwhile the elder of the two, having just returned home, was seen and was found to be free not only of gonorrhoea but also of threadworms. Piperazine cleared the younger man's infestation. In the last 6 months both have been seen again several times and there has been no recurrence of threadworms.

I am not convinced that there is a high risk of sexual transmission of threadworms or of other

intestinal parasites, bearing in mind the relatively frequent occurrence of threadworm infestation amongst the general population and the many combinations of sexual positions (Braff, 1962) adopted by homosexuals.

Yours faithfully,

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